## 02000056350

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	Sea Turtle Terrace  O1  Iton, Fl. 34212  Dityrotaterzipiernone #
Ĺ	WAIT MAIL
	3usiness Entity Name)
	ocument Number)
Certified (	Certificates of Status
Special I	Filing Officer:
	Office Use Only



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## TRANSMITTAL LETTER

4	y ·
T	idment Section ion of Corporations
st	NORTHERN PRINT SERVICES, INC. (Name of Corporation)
Dt	T NUMBER: PO 2 0000 56 350
Th	Officer/Director Resignation for a Corporation and fee are submitted for filing.
Ple	all correspondence concerning this matter to the following: $\Rightarrow \approx 3$
1	all correspondence concerning this matter to the following:  Name of Person)  (Name of Firm/Company)
<u>~</u>	(Name of Firm/Company)
_9	(Address) - (Address)
B	(City/State and Zip Code)
For	ormation concerning this matter, please call:
<u>D</u>	(Name of Person) at (941) 745-34-00 (Area Code & Daytime Telephone Number)
Ent	check for \$35.00 made payable to the Florida Department of State.
Ma Am Div P.O Tali	ess: ection Amendment Section rporations Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Po.

MAS ZIMA	RINO Rhereby	resign as Vic	E PRESI	DENT
	÷ .	-	(Title)	
	· :			
THERN PAIN	T SERVICES	, INZ,	•	,
(Na	ame of Corporation)			· · · · · · · · · · · · · · · · · · ·
- A: 5			4	•
6350	a corporation org	ganized under the	laws of the State	of
ument Number, if known)		•		
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CIDA	• · • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·	•	-
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100	(Signature of resigning of	(notonaldinacion)		
/	Construction of residential (	MIRCEI/MIECROI)	>	
	Mark			
•	· ·			
			•	

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FILED

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SLOKETARY OF STATE